

Track this shipment: <http://www.dhl.com>**Shipment Waybill**
(Not negotiable)09
2017

938 9525 655

ORIGIN

Guam

DESTINATION CODE

D C A

Payer account number and Shipment Value Protection detailsCharge to ☐ Shipper ☐ Receiver ☐ 3rd party ☐ Cash
Payer Account No. **845729382** ☐ CheckShipment Value Protection see reverse
☐ Yes Increased Protection Value (in local currency) Not all payment options are available in all countries.**From (Shipper)**

Shipper's account number Contact name

845729382

Shipper's reference (up to 32 characters)

Company name

PTI Pacifica Inc. dba IT&E

Address

**122 W. Harmon Industrial Park Road
Suite 103****Tamuning, Guam**

Postcode/Zip Code (required)

96913-4614

Phone, Fax or E-mail (required)

(671)922-4442**To (Receiver)**

Company name

Federal Communications Commission

Delivery address (DHL cannot deliver to a PO Box)

**Wireline Competition Bureau
Industry Analysis & Technology
Division
Washington, D.C.**

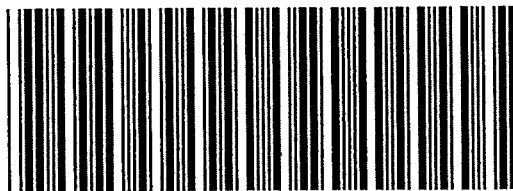
Postcode/Zip Code (required)

20554

Country

Contact person

Phone, Fax or E-mail (required)

(202) 418-0520**4 Shipment details**

Billed weight is calculated from total weight and dimensions

Total number of packages	Total Weight	Pieces	Dimensions in inches		
			Length	Width	Height
1	lb X.0	@	x	x	
	oz	@	x	x	
		@	x	x	
		@	x	x	

5 Full description of contents

Give content and quantity

Documents**6 Non-Document Shipments Only (Customs Requirement)**

Attach the original and two copies of a Proforma or Commercial invoice

Shipper's VAT/GST number

Receiver's VAT/GST or Shipper's EIN/SSN

Declared Value for Customs (as on commercial/proforma invoice)

Harmonized Commodity Code if applicable

AESTransaction Number

TYPE OF EXPORT

☐ Permanent ☐ Repair/Return ☐ Temporary

Destination duties/taxes If left blank receiver pays duties/taxes

☐ Receiver ☐ Shipper ☐ Other specify approved account number**7 Shipper's agreement (Signature required)**

Unless otherwise agreed in writing, I/we agree that DHL's Terms and Conditions of Carriage are all the terms of the contract between me/us and DHL and (1) such Terms and Conditions and, where applicable, the Warsaw Convention limits and/or excludes DHL's liability for loss, damage or delay and (2) this shipment does not contain cash or dangerous goods (see reverse).

Signature

Date

5/21/18**8 Products & Services**

International Document

International Non-Document

☒☐

Products (not all are available to and from all locations)

- ☐ EXPRESS 9:00
☐ EXPRESS 10:30
☐ EXPRESS 12:00
☐ EXPRESS / WORLDWIDE
☐ ECONOMY SELECT
☐ EXPRESS ENVELOPE
☐ OTHER

Optional Services (extra charges may apply)

- ☐ Saturday Delivery ☐ Non-standard Pickup
☐ Delivery Notification ☐ Payable Packaging
☐ Non-standard Shipment ☐ Other

Globalmail Business

- ☐ Priority ☐ Standard ☐ Other

DIMENSIONAL/CHARGEABLE WEIGHT

lb oz

CHARGES
Services

Other

Shipment Value
Protection

VAT

CURRENCY TOTAL

PAYMENT DETAILS (Check, Card No.)

No.:

Type Expires

Picked up by

Route No.

Time

Date

Shipper's copy/Receipt

03
2019

903 8343 355

ORIGIN

DESTINATION CODE

Payee account number and Shipment Value Protection details

Charge to ☐ Shipper ☐ Receiver ☐ 3rd party ☐ Cash
☐ Cheque ☐ Credit Card
Payee Account No. _____

Shipment Value Protection see reverse
☐ Increased Protection Value
Not all payment options are available in all countries. CC reference code _____

2 From (Shipper)

Shipper's account number _____ Contact name _____

Shipper's reference (up to 32 characters - first 12 will be shown on invoice)

Company name _____

Address _____

Postcode/Zip Code (required) _____ Phone, Fax or E-mail (required) _____

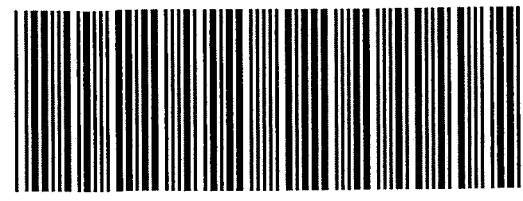
3 To (Receiver)

Company name _____

Delivery address (DHL cannot deliver to a PO Box)

Postcode/Zip Code (required) _____ Country _____

Contact person _____ Phone, Fax or E-mail (required) _____



4 Shipment details *Billed weight is calculated from total weight and dimensions*

Total number of packages	Total Weight lb oz	Pieces @	Dimensions in inches		
			Length	Width	Height
			X	X	
			X	X	
			X	X	
			X	X	

5 Full description of contents

Give content and quantity

6 Non-Document Shipments Only (Customs Requirement)

Attach the original and two copies of a Proforma or Commercial invoice

Shipper's VAT/GST number _____ Receiver's VAT/GST or Shipper's EIN/SSN _____

Declared Value for Customs (as on commercial/proforma invoice) _____ Harmonised Commodity Code if applicable _____

TYPE OF EXPORT
☐ Permanent ☐ Repair/Return ☐ Temporary

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Signature _____ Date / /

8 Products & Services

☐ Domestic ☐ International Document
☐ International Non-Document

Products (not all are available to and from all locations)

☐ EXPRESS 9:00
☐ EXPRESS 10:30
☐ EXPRESS 12:00
☐ EXPRESS / WORLDWIDE
☐ EXPRESS ENVELOPE
☐ ECONOMY SELECT
☐ OTHER _____

Optional Services (extra charges may apply)
☐ Saturday Delivery ☐ Hold for Collection
☐ Delivery Notification ☐ Payable Packaging
☐ Other _____

Globalmail Business
☐ Priority ☐ Standard ☐ Other _____

DIMENSIONAL/CHARGEABLE WEIGHT

lb oz

CHARGES Services

Other _____

Shipment Value Protection

VAT _____

CURRENCY TOTAL

PAYMENT DETAILS (Cheque, Card No)

No. : _____

Type Expires

Picked up by

Route No. _____

Time Date

Shipper's copy/Receipt